plication or Docket Number

## PATENT APPLICATION FÉE DETERMINATION RECORD Effective October 1, 2000

1103

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			22				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			22 minus 20=		• 2			X\$ 9=	18	OR	X\$18=	
IND	EPENDENT CL	AIMS	3 minus 3 =		<i>†</i>			X40=	1	OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PF	ESENT					+135=	<del>-</del>	OR	+270=	
*`If	the difference	in column 1 is	less than zero, enter "0"			olumn 2		TOTAL	373	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2)								SMALL E		OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	T OL AINA	=		X40=		OR	X80=	
	FIHOUPHESE	NIATIONSOFIM	JLTIPLE DEP	ENDEN	CLAIM			+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
٠		(Column 1)		(Colu	ımn 2)	(Column 3)	•	ADDII. FEE			ADDII. 1 EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		<u> </u> = '		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPEN				T CLAIM		1	+135=		OR	+270=	
								TOTAL	i. '	OR	TOTAL	
, .		(Oalisma 4)		(Onle	· 0\	(Column 2)		ADDIT. FEE		10	ADDIT. FEE	
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	JMN 2) HEST MBER TIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR		
* If the entry in column 1 is less than the entry in column 2, write 0 in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	mber Previously Pa	aid For" (Total o	r Indepen	ident) is the	e highest numb	er fo	und in the ap	propriate bo	x in c	olumn 1.	